

|                                                                                                                                                        |   |    |   |                          |                    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---|----|---|--------------------------|--------------------|
| Substitute for form 1449/PTO and PTO/SB/08<br><br><b>INFORMATION DISCLOSURE<br/>STATEMENT BY APPLICANT</b><br><i>(use as many sheets as necessary)</i> |   |    |   | <b>Complete if Known</b> |                    |
|                                                                                                                                                        |   |    |   | Application Number       | 10/581,003         |
|                                                                                                                                                        |   |    |   | Filing Date              | 13 September, 2007 |
|                                                                                                                                                        |   |    |   | First Named Inventor     | MADDESS, Ted       |
|                                                                                                                                                        |   |    |   | Art Unit                 | 3735               |
|                                                                                                                                                        |   |    |   | Examiner Name            | Christian Y. Jang  |
| Sheet                                                                                                                                                  | 1 | of | 2 | Attorney Docket No       | SPR10150P00080US   |

| US PATENT DOCUMENTS |                       |                                          |                                |                                                 |                                                                           |
|---------------------|-----------------------|------------------------------------------|--------------------------------|-------------------------------------------------|---------------------------------------------------------------------------|
| Examiner Initials*  | Cite No. <sup>1</sup> | Document Number                          | Publication Date<br>MM-DD-YYYY | Name of Patentee or Applicant of Cited Document | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear |
|                     |                       | Number-Kind Code <sup>2</sup> (if known) |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |
|                     |                       | US-                                      |                                |                                                 |                                                                           |

| FOREIGN PATENT DOCUMENTS |                       |                                                                                   |                               |                                                 |                                                                           |                |
|--------------------------|-----------------------|-----------------------------------------------------------------------------------|-------------------------------|-------------------------------------------------|---------------------------------------------------------------------------|----------------|
| Examiner Initials*       | Cite No. <sup>1</sup> | Foreign Patent Document                                                           | Publication Date<br>MM-DD-YYY | Name of Patentee or Applicant of Cited Document | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear | T <sup>6</sup> |
|                          |                       | Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>5</sup> (if known) |                               |                                                 |                                                                           |                |
|                          |                       |                                                                                   |                               |                                                 |                                                                           |                |
|                          |                       |                                                                                   |                               |                                                 |                                                                           |                |
|                          |                       |                                                                                   |                               |                                                 |                                                                           |                |
|                          |                       |                                                                                   |                               |                                                 |                                                                           |                |
|                          |                       |                                                                                   |                               |                                                 |                                                                           |                |
|                          |                       |                                                                                   |                               |                                                 |                                                                           |                |
|                          |                       |                                                                                   |                               |                                                 |                                                                           |                |

|                    |  |                 |  |
|--------------------|--|-----------------|--|
| Examiner Signature |  | Date Considered |  |
|--------------------|--|-----------------|--|

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached. This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14.

|                                                                                                                                                        |   |    |   |                          |                    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---|----|---|--------------------------|--------------------|
| Substitute for form 1449/PTO and PTO/SB/08<br><br><b>INFORMATION DISCLOSURE<br/>STATEMENT BY APPLICANT</b><br><i>(use as many sheets as necessary)</i> |   |    |   | <b>Complete if Known</b> |                    |
|                                                                                                                                                        |   |    |   | Application Number       | 10/581,003         |
|                                                                                                                                                        |   |    |   | Filing Date              | 13 September, 2007 |
|                                                                                                                                                        |   |    |   | First Named Inventor     | MADDESS, Ted       |
|                                                                                                                                                        |   |    |   | Art Unit                 | 3735               |
|                                                                                                                                                        |   |    |   | Examiner Name            | Christian Y. Jang  |
| Sheet                                                                                                                                                  | 2 | of | 2 | Attorney Docket No       | SPR10150P00080US   |

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

| NON PATENT LITERATURE DOCUMENTS |                      |                                                                                                                                                                                                                                                       |  |                |
|---------------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------|
| Examiner Initials *             | Cite No <sup>1</sup> | Include name of Author (in CAPITALS), title of the article, (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. |  | T <sup>2</sup> |
|                                 |                      | Australian Examiner's Second Report, 24 August, 2010 – IP Australia                                                                                                                                                                                   |  |                |
|                                 |                      | Japanese Examiner's Second Report, 9 November, 2010 – Japan Patent Office – and English translation                                                                                                                                                   |  |                |
|                                 |                      |                                                                                                                                                                                                                                                       |  |                |
|                                 |                      |                                                                                                                                                                                                                                                       |  |                |
|                                 |                      |                                                                                                                                                                                                                                                       |  |                |
|                                 |                      |                                                                                                                                                                                                                                                       |  |                |
|                                 |                      |                                                                                                                                                                                                                                                       |  |                |
|                                 |                      |                                                                                                                                                                                                                                                       |  |                |
|                                 |                      |                                                                                                                                                                                                                                                       |  |                |
|                                 |                      |                                                                                                                                                                                                                                                       |  |                |
|                                 |                      |                                                                                                                                                                                                                                                       |  |                |
|                                 |                      |                                                                                                                                                                                                                                                       |  |                |
|                                 |                      |                                                                                                                                                                                                                                                       |  |                |
|                                 |                      |                                                                                                                                                                                                                                                       |  |                |
|                                 |                      |                                                                                                                                                                                                                                                       |  |                |
|                                 |                      |                                                                                                                                                                                                                                                       |  |                |

|                    |  |                 |  |
|--------------------|--|-----------------|--|
| Examiner Signature |  | Date Considered |  |
|--------------------|--|-----------------|--|

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached. This collection of information is required by 37 CFR 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.